



COLORADO

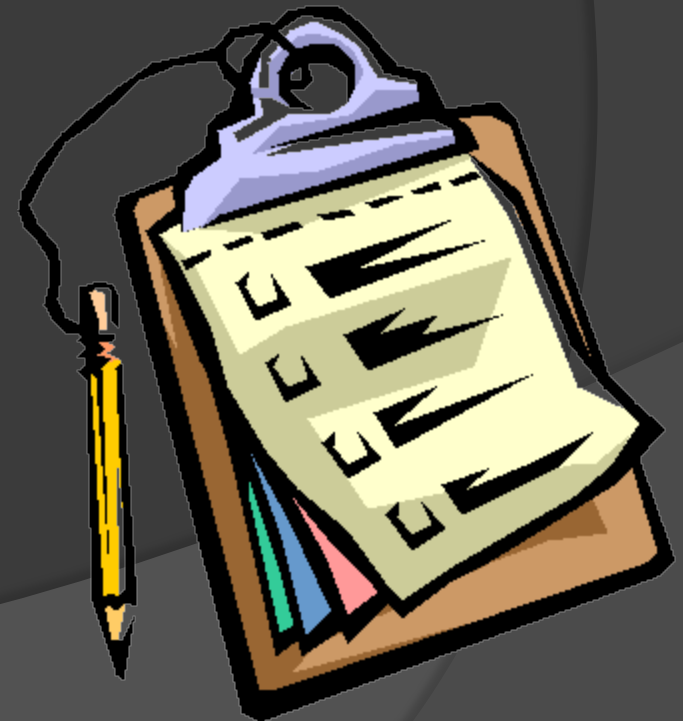
Department of Public
Health & Environment

LPHA IMPLEMENTATION PLAN COLORADO BOARD OF HEALTH RULE EMERGENCY PREPAREDNESS AND RESPONSE

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Agenda

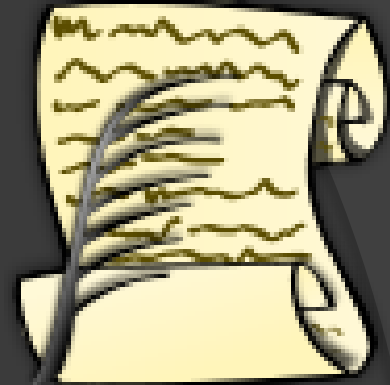
- Acronyms
- Rule History
- Goals
- Regulation 1
- Questions/Feedback



Acronyms & Definitions

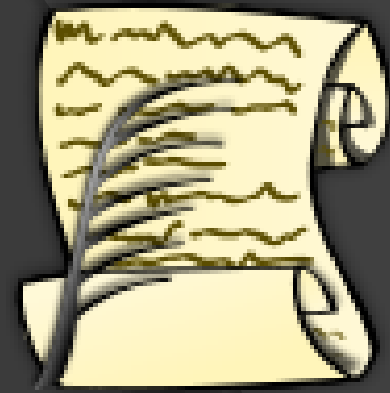
- AAR/IP: After Action Report/Improvement Plan
- EMS: Emergency Medical Services
- ESF8: Emergency Support Function 8
- FQHC: Federally Qualified Health Centers
- HPP: Hospital Preparedness Program
- LPHA: Local Public Health Agency
- OEM: Office of Emergency Management
- PHEP: Public Health Emergency Preparedness
- PHIA: Public Health Improvement Act
- PIO: Public Information Officer
- RETAC: Regional Emergency Trauma Advisory Council
- SNS: Strategic National Stockpile

Rule History



- ◉ **Created in 2001**
- ◉ **State Board of Health Regulations Pertaining to Preparations for a Bioterrorist Event, Pandemic Influenza, or an Outbreak by a Novel and Highly Fatal Infectious Agent or Biological Toxin**
 - 6 CCR 1009-5
- ◉ **6 Regulations**
 - 1-LPHA, 2-Hospitals, 3-Rural Clinics/FQHC's, 4-RETAC/EMS, 5-CDPHE, 6-Compliance
- ◉ **Goal to build a base of preparedness**
- ◉ **Language update in 2007**
- ◉ **Stakeholder Workgroup**

Rule Needs



- ◎ **Cross walked**
- ◎ **State Board of Health Regulations**
 - **Core Public Health Services**
 - 6 CCR 1014-7
 - Section 4.1.E
- ◎ **5 Parts**
 - Participate in all-hazards planning, training, exercises, response
 - Lead or support ESF8
 - Emergency communication strategy
 - Inform the Public
 - Activate personnel
 - Coordinate with OEM and other responders
 - Promote community preparedness

Implementation Plan GOALS

- Goal – To assist LPHA's with compliance
- Goal – To integrate the rule with the Public Health Emergency Preparedness Program (PHEP)



Regulation 1. Preparations by Local Public Health Agencies for an Emergency Epidemic

- Part 1 – Maintain a notification list
- Part 2 – Mutual Aid Agreement
- Part 3 – Emergency Operations Plan
- Part 4 - Exercise

Part 1 – Notification List

- ⦿ Maintain an up-to-date notification list for providing information to external partners
 - Hospitals, RETAC/EMS, rural health clinics, federally qualified health centers, OEM
- ⦿ Annually confirm list is accurate
- ⦿ Annually conduct a test
 - Real life emergency incident use can be substituted
- ✓ Contained within Colorado Notification System deliverable



Part 2 – Mutual Aid Agreement

- Sign a uniform mutual aid agreement with public health agencies statewide
 - Reviewed, updated, and sent for signature every 5 years.
- ✓ Accomplished in 2014-2015



Part 3 - Plans

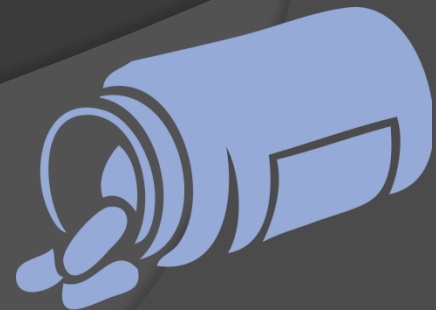
- ⦿ Maintain agency emergency operations plan
 - Including ESF8 annex
- ⦿ Reviewed and updated
 - At least every 3 years
 - Submitted to CDPHE/OEPR
 - Submitted to local Board of Health
 - Copy made available to:
 - OEM, Hospital(s), Rural Health Clinics, FQHC's, RETAC's.

Part 3 - Plans

- ◎ Plan will address the following areas:
 - Organization and assignment of employees
 - Having sufficient supplies/PPE
 - Training for assigned staff on use of personal protective equipment
 - Process for the provision of PPE
 - PPE, at a minimum, shall be able to achieve standard precautions
 - An internal emergency, after-hours call-down list

Part 3 - Plans

- ◎ Plan will address the following areas:
 - Procurement, storage and distribution of at least a three-day supply of an antibiotic
 - Category A bacterial agents
 - CDPHE designated
 - Used as prophylaxis employees immediately responding
 - Another antibiotic for employees who may be unable to take the antibiotic of first choice
- ✓ Designated antibiotic letter
- ✓ Use unspent funding



Part 3 - Plans

- ◎ Plan will address the following areas:
 - Creation of an operations center
 - Within the agency or part of a local emergency operations center
 - Centralizing telephone, radio, and other electronic communications
 - Compiling surveillance data
 - Maintaining a log of operations, decisions and resources
 - Responding to executive orders of the governor
 - Monitoring the situation, including infection control in each hospital
 - Assessment and management of infection control in the community
 - Assessment and management of the disposal of human corpses
 - Management and dispensing of medical countermeasures

Part 3 - Plans

- ⦿ Plan will address the following areas:
 - Management of the SNS
 - Identification of a public information officer
 - Coordination of information sharing
 - PIO personnel for multiple operational periods
 - Actions are being taken
 - When the incident/epidemic is over
 - Implementation of back-up communications system
 - 800 megahertz radios
 - Amateur radio emergency services



Part 3 - Plans

- ⦿ 2016-2017 EOP Submission and Assessment
 - Plans assessed against BOH Rule
- ⦿ 2017-2018 Facilities address identified gaps from assessment
- ⦿ 2018-2019 Exercise EOP
 - Submit AAR/IP to OEPR
- ⦿ 2019-2020 EOP Submission



Part 4 - Exercise

- ⦿ Exercise and test EOP ever 3 years
 - ⦿ Emergency incidents where EOP is activated may be substituted
 - ⦿ After Action Report/Improvement Plan (AAR/IP) submitted to CDPHE-OEPR within 60 days of occurrence.
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- ✓ The functional exercises of 2015-2016 will be used as compliance.

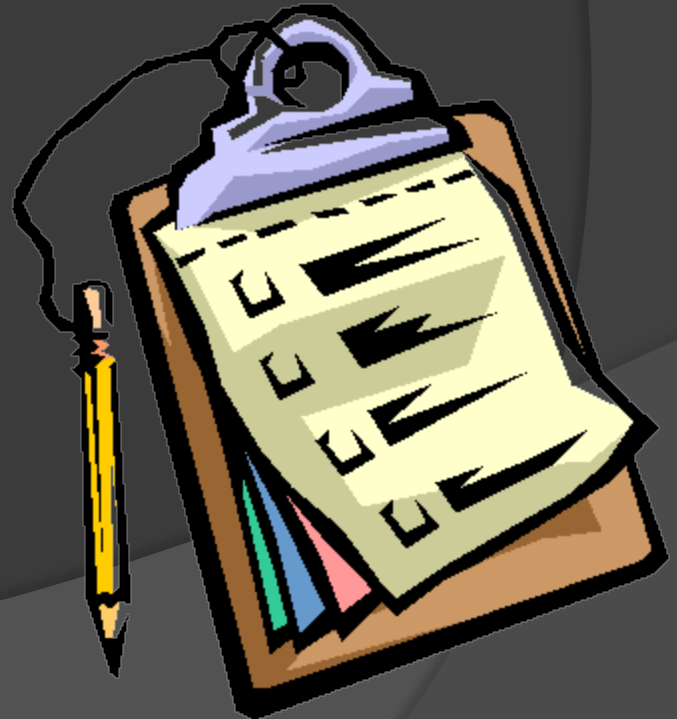
Regulation 6 - Compliance

- Completion of BOH rule determines eligibility for protections
- 24-33.5-711.5 C.R.S.
- Civil and criminal liability protections
- Excludes willful misconduct/disregard



Conclusion

- Acronyms
- Rule History
- Goals
- Regulation 1 & 6
- Questions/Feedback





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Questions/Feedback?

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